

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of

MISHIMA et al

Serial Number: 09/851,943

Filed: May 10, 2001

For: DISPLAY DEVICE

Attorney Docket No. HITA.0053

Art Unit 2673

**Examiner
KOVALICK, Vincent E.**

RECEIVED

OCT 21 2004

Technology Center 2600

**Honorable Assistant Commissioner for Patents
Washington, D.C. 20231**

COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

| FOR | TOTAL WITH NEW CLAIMS ADDED | TOTAL CURRENTLY ON FILE | CLAIMS PAID | RATE | CALCULATION |
|---|-----------------------------------|-------------------------------|---------------|---------|-------------|
| Total Claims | 12 | 12 | (Over 20) | x \$18 | 0 |
| Independent Claims | 1 | 1 | 5 (Over 3) | x \$88 | 0 |
| MULTIPLE DEPENDENT CLAIM(S) | | | | + \$300 | 0 |
| REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED | | | | | |
| TOTAL | | | | | 0.00 |

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

[x] Response to Office Action
(w/claim amendments)

[] Substitute Specification

[] Preliminary Amendment

[] Other _____

[x] Petition for Extension of Time (1 month)

[] Terminal Disclaimer

[] Letter to Draftsperson

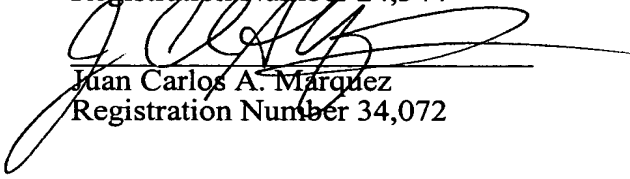
[] Assignment

[] Petition under _____

- [] Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- [x] A check in the amount of **\$110.00** to cover the one-month extension fee is enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

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